

UNITED STATES DISTRICT COURT

District of DELAWARE

Palamarchouk

SUMMONS IN A CIVIL ACTION

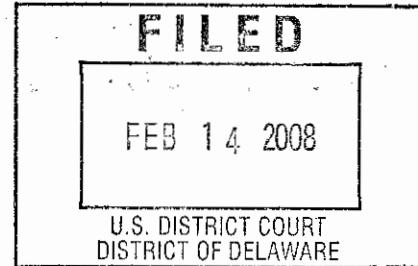
v.

Chertoff, Gonzales, Novak, Mueller

CASE NUMBER: - 08-80 -

TO: (Name and address of Defendant)

Emilio T. Gonzalez, Director
U.S. Citizenship and Immigration Services (USCIS)
U.S. Department of Homeland Security
Washington, DC 20528



25

YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (name and address)

VITALY S. PALAMARCHOUK
34 MEADOWBROOK LN
NEWARK, DE, 19711
Phone: (302)234-1260
Email: Vitalic.palamarchouk@astrazeneca.com

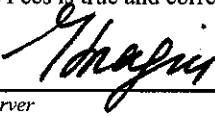
an answer to the complaint which is served on you with this summons, within 60 days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

CLERK

DATE

(By) DEPUTY CLERK

AO 440 (Rev. 8/01) Summons in a Civil Action

RETURN OF SERVICE		
Service of the Summons and complaint was made by me ⁽¹⁾	DATE	02/11/08
NAME OF SERVER (PRINT) <i>DENNADY SMAGIN</i>	TITLE	RA
<i>Check one box below to indicate appropriate method of service</i>		
<input type="checkbox"/> Served personally upon the defendant. Place where served:		
<input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left:		
<input type="checkbox"/> Returned unexecuted:		
<input checked="" type="checkbox"/> Other (specify): <i>MAILED ON 02/07/08 via USPS CERTIFIED MAIL, RETURN RECEIPT. DELIVERED ON 02/11/08.</i>		
STATEMENT OF SERVICE FEES		
TRAVEL	SERVICES	TOTAL \$0.00
DECLARATION OF SERVER		
I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.		
Executed on <u>02/11/08</u> Date	 <i>Signature</i>	
<u>34 MEADOWBROOK LN</u> <small>Address of Server</small> <u>NEWARK, DE 19711</u>		

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.


[Home](#) | [Help](#)
[Track & Confirm](#)

Track & Confirm

Search Results

Label/Receipt Number: 7004 1160 0003 8376 8521

Detailed Results:

- Delivered, February 11, 2008, 8:10 am, WASHINGTON, DC 20528
- Arrival at Unit, February 11, 2008, 3:09 am, WASHINGTON, DC 20022
- Acceptance, February 07, 2008, 4:32 pm, WILMINGTON, DE 19803

[Track & Confirm](#)

Enter Label/Receipt Number.

[**< Back**](#)
[**Return to USPS.com Home >**](#)

Notification Options

Track & Confirm by email

Get current event information or updates for your item sent to you or others by email.

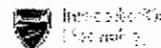
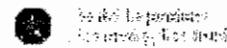
[**Go >**](#)

[Site Map](#) [Contact Us](#) [Forms](#) [Gov't Services](#) [Jobs](#) [Privacy Policy](#) [Terms of Use](#) [National & Premier Accounts](#)

Copyright© 1999-2007 USPS. All Rights Reserved.

No FEAR Act EEO Data

FOIA



U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		
For delivery information visit our website at www.usps.com		
OFFICIAL USE		
8521 8003 0000 0000 1160 1160 7004 7004	Postage \$ 1.14 0503 Certified Fee \$ 2.65 Return Receipt Fee (Endorsement Required) \$ 2.15 Restricted Delivery Fee (Endorsement Required) \$ 0.00 Total Postage & Fees \$ 5.94 02/07/2008	
	Emilio T. Gonzalez, Director Sent To U.S. Citizenship and Immigration Services (USCIS) Street, Apt. No.; or PO Box No. U.S. Department of Homeland Security City, State, ZIP+4 Washington, DC 20528	
	<small>PS Form 3800, Jun 2000</small>	

VITALY PALAMARCHOUK
34 MEADOWBROOK LN
NEWARK, DE 19711
308-541-1000 FAX 302-468-1000

PR

PEB

WILMINGTON, DE 19801

Vitaly S. Palamarchouk

34 Meadowbrook Ln
Newark, DE 19711

Peter Dalleo, Clerk of Court
Lockbox 18
844 King Street,
US COURTHOUSE
WILMINGTON, DE 19801

CASE
#08-80

U.S.M.S.
X-RAY